

#### **CITY OF TUCSON**

OFFICE OF THE CITY CLERK

# PETITION DRIVE POLITICAL COMMITTEE CAMPAIGN FINANCE ADMINISTRATION REPORT RECEIPT

NAM	E OF	COMMITTEE FILING REPORT	RECEIVED
	Tak	e Back Tucson Mayor	
		(Name of Political Committee)	10 MAR 15 P1:59
or_		(Name of Sponsoring Organization, when applicable)	
			OFFICE OF THE
Stater	nent o	f Organization ID Number 10-162-CT Petition	(when applicable)
		Political Committee Statement Of Organization ID Number	r Original <i>or</i>
CAMI	PAIGN	V FINANCE REPORT:	☐ Amended
	Ø,	60 Days after the Date of Issuance of Petition Number by City Clerk (Report date of: January 6, 20	010 through March 4, 2010) Due March 15, 2010
		State Campaign Finance Report (Filed on or before June 30,	2010)
		At the Time of Filing a Petition Filed More Than Sixty (60) Days After the Date of Issuance. (Report date of:	)
		Thirty (30) days after the filing of the petition. (Report date	of:)
		In the case of any petition not filed with the city clerk with Charter or Tucson Code, all petition drive political commit days after the expiration of said deadline. (Report date of:_	tees shall file campaign finance reports twenty (20)
		State Pre-Primary Election Report (Filed on or before August	t 12, 2010)
		State Post-Primary Election Report (Filed on or before September 1997)	mber 23, 2010)
		State Pre-General Election Report (Filed on or before Octobe	er 21, 2010)
		State Post-General Election Report (Filed on or before Decer	nber 2, 2010)
		Political Committee No Activity Statement (Report date of:	)
	M	Termination Statement (Final report must be included if not p	previously filed)
		Other	·
		C:	5 M e Deputy City Clerk
		Signature	
			3/15/10

Date



#### STATE OF ARIZONA POLITICAL COMMITTEE

#### TERMINATION STATEMENT

A.R.S. §16-914; A.R.S. § 16-915.01	CITY OF TUCSON RECEIVED
Full Name of Committee  3901 & Broadway Blvd.	<b>10</b> MAR <b>15</b> P1:59
Address    1	OFFICE OF THE CITY CLERK
2.	3. ID# [0-]62-CT
SELECT THE BOXES THAT APPLY:	
A. This is to certify that all contributions received and all expenditures made on behalf of above have been reported as required by A.R.S. § 16-913. We further certify that the receive any contributions or make any disbursements, that the committee has no outstand that any surplus monies have been disposed of pursuant to A.R.S. § 16-915.01.	political committee will no longer
Please mark the appropriate statement below to indicate which campaign finance reposurplus monies.	rt states the disposition of any
The disposition of surplus monies was submitted on the campaign finance repair $3-15-10$ .	port filed on
The disposition of surplus monies is reported on the attached campaign finan	ce report.
B. This committee hereby terminates all activity within the jurisdiction of the City of Tuc intends to remain active in other jurisdictions and that the committee's remaining mor other jurisdictions.	
C. This committee has transferred the committee's debts and obligations to a subsequent	committee.
Please enter the full name and ID# of the committee into which debts and obligations have been t	ransferred.
Name of Committee	ID#
We, Humberto S. Lopez & Christopher Evans (Name of Chairman and Treasurer - Printed)	, certify under penalty
of perjury that this statement of termination pursuant to Λ. R. S. § 16-914 is true and complete.	//
Signature of Chairman Signa  Signature of Chairman	ture of Treasurer

For Office Use Only

CITY OF TUCSON

## PETITION DRIVE POLITICAL COMMITTE STATE OF ARIZONA CAMPAICN FINANCE REPORT

For Office Use Only

#### CITY OF TUCSON

		CAMPAIGN FINANCE REPORT	200
1		Take BACK Tucson Mayor CI	Attachment #3
١.	Full	Name of Committee	RECEIVED
		Name of Committee 3901 & Broadway Blud.	
	*****	101 & Broadway Brown.	+
	Add	20 10	MAR 15 P1:59
		VUSON 85711 520-322-69940	11111 15 11 1-55
	City	Zip Code Phone Number	
)			
۷.	Spor	soring Organization and Office	3A. ID#
	. 400	The organization and office	CITY CLERK
			2
	Nan	e of Candidate and Office Sought (if applicable)	10-162-CT
			10-100-01
	E-M	iil Address Fax #	
_	n n	PORTING PERIOD (PL 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	FILING DEADLINE
4.	RE	PORTING PERIOD (Please check appropriate box)	FIEING DEADEINE
1.		60 Days after the Date of Issuance of Petition Number by City Clerk:	40.4
		For Period of January 6, 2010 through March 4, 2010	* March 15, 2010
).		June 30 Report	
		January 1, 2010 through May 31, 2010	June 30, 2010
,	П	At the time of filing a petition filed more than sixty (60) days after the date of issuance.	
		At the time of fining a period med more than sixty (60) days are the ance or resumer.	
•		This (20) less fless of the motition	
1.		Thirty (30) days after the filing of the petition.	
			W. L. Aller J. T. Clarker T.
2.		In the case of any petition not filed with the city clerk within the deadline for filing estal	olished by the Tucson Charter or Tucson
		Code, all petition drive political committees shall file campaign finance reports twenty (	20) days after the expiration of said deadline.
		Pre-Primary Election	
		For Period of June 1, 2010 through August 4, 2010	August 12, 2010
1	П	Post-Primary Election	
÷		For Period of August 5, 2010 through September 13, 2010	September 23, 2010
		For Period of Adgust 3, 2010 tillough september 13, 2010	
		Pre-General Election	
1.		For Period of September 14, 2010 through October 13, 2010	October 21, 2010
		For refloa of September 14, 2010 tillough October 13, 2010	
		Post General Election	
		For Period of October 14, 2010 through November 22, 2010.	December 2, 2010
		N.	
		January 21 Deport	
	Ш	January 31 Report	January 31 2012
		For Period of November 23, 2010 though December 31, 2011	

k. X Other Termination of Petition

### DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1.	Committee Name TAKE	BACK TUCSON	MAYOF	3. ID# 10-142-CT
2:	Report Covering Period From	1-6-2010	Thru_	3-15-10

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE			
4. Contributions other than loans and in-kind:	al /- m = 2.1	0			
(a) Individuals - more than \$25 (Total from Schedule A)	\$5,033.39	\$5,033 34			
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)					
(c) Political Committees (Total from Schedule B)	<del> </del>				
(d) Subtotal Contributions [add 4(a), 4(b) and 4(c)]					
(e) Refund of Contributions (Total from Schedule F-2)	d = -22 211	15 022 716			
(f) Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	\$5,033.34	\$5,033.34			
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	\$ 3,333.33	¥3,333.33			
(b) All other loans (Total from Schedule C-1)					
(c) Total loans [add 5(a) and 5(b)]	\$3,333.33	\$3,333.33			
6. In-kind contributions (Total from Schedule E)	\$ 837.11	4 837.11			
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)					
8. TOTAL Receipts [add 4(f), 5(c), 6, and 7]	\$9,203.78	\$9,203.78			
DISBURSEMENTS					
Expenditures for Operating Expenses (Total from Schedule D)	\$4,813.82	\$4,813.82			
10. Independent Expenditures (Total from Schedule D-1)		1			
11. Value of In-kind expenditures (Total from Schedule E)	\$ 837.11	\$ 837.11			
12. Loans made by reporting committee (Total from Schedule D-2)					
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	13,333.33	\$3,333.33			
(b) Repayment of all other loans (Total from Schedule D-5)		,			
(c) Total Loan Repayments [add 13(a) and 13(b)]	13 333.33	¥3,333.37			
14. Transfers to other political committees (Total from Schedule D-6)					
15. Any other disbursement (Total from Schedule D-7)	\$219.52	\$219.52			
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]					
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)					
18. TOTAL disbursements [ subtract line 17 from line 16]	9,203-78	9,203.78			
19.Total Outstanding Debts owed by Reporting Candidate or Political Comm. (Schedule F-3)	2				
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.					
Type or Print Name of Treasurer Christ apher Evans					
Signature of Treasurer or Candidate or Designating Individual:		Date 3/10/10			

#### **CONTRIBUTIONS FROM INDIVIDUALS\*** (More than \$25)\*

1.	Committee Name TAICE BACLE TUCSON M	Ayo	3. ID#	
2.	Report Covering Period from 1-6-10	hru 3-15	7-10	
4.	CONTRIBUTIONS  NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
a.	STREET ADDRESS 1581 & Crimson Cangon Place	1/15/10	\$ 333.33	\$333.33
	OCCUPATION EMPLOYER F	e e	,	
b.	STREET ADDRESS USSO N. Oracle Rd.	1/22/10	\$766.67	\$766.67
	CITY STATE STATE 85704  OCCUPATION EMPLOYER Self			
C.	STREET ADDRESS 3002 N. CAMPBELL AVE. SVITEZOO	1/28/10	#166.67	\$766.67
	OCCUPATION EMPLOYERS EIF			
d.	STREET ADDRESS  O BOX 696	2/1/10	\$764.67	\$ 766.47
	OCCUPATION STATE ZIP 85028			e e
e.	LAST FIRST MI Wadlund Trust Arthur Jananne R STREET ADDRESS 5840 N. Camino de la Sombra	2/2/10	\$300.00	\$300.00
	CITY STATE STATE 85718  OCCUPATION EMPLOYER			
5.	[If last page of Schedule A, transfer total to Detailed  Summary Page line 4(a), Column A]	0 PFICE 0		
REV	*If contributions of \$25 or less are listed with contributor's name, address, of do not include them on Schedule A-1.	RECEI	ployer on Schedule A,  Schedule A Page	of

Schedule A Page \_\_\_\_of\_\_\_

### CONTRIBUTIONS FROM INDIVIDUALS\* (More than \$25)\*

1.	Committee Name Take BACK TUCSON N	1Ay 01	3. ID#	
2.	, , , ,	thru3-1	5-10	
4.	CONTRIBUTIONS  NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
а.	KASSEV Michael Trust MI STREET ADDRESS 3573 & SUNTISE Dr. Suite 225	2/10/10	\$ 764.67	\$766.67
	OCCUPATION STATE AZ 85718  EMPLOYER		÷	
b.	STREET ADDRESS 3901 E. Brondway Blud.	2/12/10	\$666 67	\$666-67
	CITY STATE ZIP 85711 OCCUPATION FROM FINALS FACE & STATE & S		*	
C.	STREET ADDRESS 4229 & Speedway	2/12/10	\$ 333.33	\$666.66
	TVCSON AT 85712  OCCUPATION EMPLOYER  TNYSTMENTOY  OCCUPATION  TNYSTMENTOY  TNYSTMENTOY  TNYSTMENTOY  OCCUPATION  TNYSTMENTOY			
d.	STREET ADDRESS & Speedway	2/12/10	\$333.33	\$666.66
	OCCUPATION STATE 85717  OCCUPATION EMPLOYER			0 0
e.	LAST FIRST MI			MAR REL
	STREET ADDRESS			SEIV SEIV
	CITY STATE ZIP		-  -  -	UCSO ED THE
	OCCUPATION EMPLOYER		,	2
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A  [If last page of Schedule A, transfer total to Detailed  Summary Page line 4(a), Column A]  *If contributions of \$25 or less are listed with contributor's name, address, or	occupation and emp	5,033.34 bloyer on Schedule A.	

do not include them on Schedule A-1.

**REV 3/00** 

#### OTHER LOANS

SCHEDULE C1

Committee Name Take Bacle(Mayor)

3. ID#

	Report Covering Period from 1-4-10 thru 3-1	3-10		
	ALL OTHER LOANS	DATE LOAN	AMOUNT OF	TOTAL THIS
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	RECEIVED	LOAN	CAMPAIGN TO DATE
	NAME OF PERSON OR COMMITTEE MAKING LOAN. ADDRESS, CITY, STATE, ZIP AND ID#	1/8/10	3,333.33	
	3901 E. Broadway Ticson Az 85745  NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
		3		
	DESCRIPTION SHALL UP COST			
Ο.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
Э.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#	· · · · · · · · · · · · · · · · · · ·		
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#		01	0
	DESCRIPTION	,	TFICE SITY	REC MAR
d.	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP AND ID#		OF THE	EIVED
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP AND ID#			3
	DESCRIPTION			
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1  [If last page of Schedule C-1 transfer total to Detailed Summary Page, Line 5(b), Column A]		3,333.33	

1.	Committee Name TAKE BACK TUCSON MAJU	2. ID#	
3.	Report Covering Period from: 1-4-10 thru 3-15	-10	
4.	EXPENDITURES  NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
а.	NAME AND ADDRESS TO WHOM EXE END TO THE PARTY OF THE PART	1/14/ 2010	
	Reimbuse for petitions	2300	610.00
b.	NAME. ADDRESS, CITY, STATE AND ZIP MORET Advertising a Associates 2900 N. Swan Rd., Swite 201 TUCSON, AZ 25112 DESCRIPTION OF ITEMS OR SERVICES PURCHASED TULT Page ad in The Aviana Daily Star on January 18th Graphic	1/15/2010 CHECK#	1161.00
C.	NAME, ADDRESS, CITY, STATE AND ZIP BEST BUY 6025 E. Broadway TUCSON, AZ 86711	1/18/2010	
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED  TWO COMPUTERS	130Z	252.22
d.	NAME, ADDRESS, CITY, STATE AND ZIP WELLS Fargo Bank, NA POBUL 2908 Phoenix AZ 85062-2908 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	1/19/2010 CHECK#	4
e.	Harland Clark Chacks  NAME, ADDRESS, CITY, STATE AND ZIP  Trent Humphries 140 W. Vista Grando Dr.	1/anlania	10.32
9	DESCRIPTION OF ITEMS OR SERVICES PURCHASED COPIER Paper, Park Rental FCC, Event Insurance Press release equipment	1/30/30/0 CHECK#	198.68
f.	NAME, ADDRESS, CITY, STATE, AND ZIP HASIEH & ASSOCIATES 8387 N. Ovacle, Suite 100 TUCON, AZ 85704 DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D	2304	111.80
	[If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]	×	

10 MARIS PM 2: 12

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<sup>\*</sup>Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

SCHEDULE D

1.	Committee Name TAKE BACKTICON MAYOR	2. ID#			
3.	Report Covering Period from:  -6-10 thru 3-15	-10			
4.	EXPENDITURES	DATE	AMOUNT		
		EXPENDITURE	OF THE		
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE		
a.	NAME, ADDRESS, CITY, STATE AND ZIP				
	Tenniter Humphries	26			
	140 W. Vista Grande DV. Tucson, AZ 86704	1/. 1. 210			
	Tucson, A2 86704	/ )   2010			
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		9		
	Park Reservation	2305	3,00		
b.	NAME. ADDRESS. CITY, STATE AND ZIP Party Express Rental Egupment Inc.				
	Party Geness Kental Egupmen Tice.				
	3244 N. Chapel Tucson, AZ 85716 DESCRIPTION OF ITEMS OR SERVICES PURCHASED	1/21/2010			
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
	Podium, PASystem. 2 Tents, Tables, Chairs	72.	710 72		
	Generator	2306	218.36		
C.	NAME, ADDRESS, CITY, STATE AND ZIP				
	Robert Lebsack	*			
	87135. Desert Rainbow Dr.	1/21/2010			
	Turson, AZ 85747	CHECK #			
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED				
	2 USDS Wireless Cards	2307	28.82		
d.	NAME, ADDRESS, CITY, STATE AND ZIP	,			
	The Nordensson Group, LC	,			
	1640 E. River Rd. Suite 110	1/25/2010			
	Tucson, AZ 85718 - 7645  DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
	3	2400	11111		
	Consulting Sorvice  NAME, ADDRESS, CITY, STATE AND ZIP	2308	6le6.67		
e.	NAME, ADDRESS, CITY, STATE AND ZIP				
	Agapemedia.net, LC 8215 N. Oracle RA. #65				
	8215 N. Oracle RM. 7765	2/1/2010			
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#			
	× *		~		
	Video production	2309	53,33		
f.	NAME ADDRESS CITY STATE AND ZIP				
	Trent-Humphries				
	140 W. Vista Grande Dr.	0//			
	Trent-Humphries 140 W. Vista Grande Dr. TUCSON, AZ 85704  DESCRIPTION OF ITEMS OR SERVICES PURCHASED OFFICE SUPPLIES, COpies, FOOD, Badges, Radio, Phone System,	2/1/2010			
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED  LA CLAN CURPONICE, CAROLO FORDE RADGE DALID DLONG SIGHT	CHECK #			
	Design Line	2310	258.75		
5	Phone Line ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D				
J.	[If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A	.10			
	MF OF THE	440	,		
	*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.				

10 MARIS PM 2: 13

CITY OF TUCSON

Schedule D Page \_\_\_ of \_\_\_

1.	Committee Name 14 le c	BACK TULSON	Mayor	2. ID#

3. Report Covering Period from: 1-4-7010 thru 3-15-10

4.	EXPENDITURES	DATE	AMOUNT
		EXPENDITURE	OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
a.	NAME. ADDRESS, CITY, STATE AND ZIP. ASCENT Management Consulting, Ltd. 330 E. Glen Wurst Dr.		
¥	330 E. Glen Wurst Dr.	2/01	
	000 valley, AZ 85704	2/5/2010	
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#	500.00
	Services - Walking Lists	2311	000.
b.	NAME. ADDRESS. CITY. STATE AND ZIP AGAPEMEDIA: NET, LLC 8275 N. ORAÇIC Rd. # 65	*	
	18245 N Marcie Pd # 65		
	ORO Valley, AZ 85704	2/5/2010	
	DESCRIPTION OF FEMS OR SERVICES PURCHASED	CHECK#	
	Video Production	2312	60.00
C.	NAME, ADDRESS, CITY, STATE AND ZIP		
	American Express		
	Box 0001 Los Angeles, CA 90096-0001	2/12/2010	
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#	
	M 1 1/2 1/2 C 2/1/2	2313	7.67
a	Meals - old Puzblo Grille		π ψ
u.	NAME, ADDRESS, CITY, STATE AND ZIP GOVDON Magin-type		
	13849 E, Canyon Fairway Trail Vail, AZ 85641		
	Vail, AZ 85641	2/15/2010	
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED DOW LOCKS, LOCKSMITH, WILL ROWLER, WIVELESS USB	CHECK #	
	Adapter, Office Supplies NAME, ADDRESS, CITY, STATE AND ZIP	7314	127,91
e.	NAME, ADDRESS, CITY, STATE AND ZIP	2-18-2010	149.72
	Deb Weise   1038 N. Catalina Ave.	7 (3	7-7-6
	TUCSON AZ 85711		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK#	
	Graphic Besign	2317	
f.		,	195.31
	NAME, ADDRESS, CITY, STATE AND ZIP Trent Humphries 140 W. Vista Grandle Dr.		113.
	TUCSON AZ 85704		
		CHECK#	
	Copy writing, time, Graphic Drsign	2318	
_	ENTED TOTAL ONLY IE LAST DAGE OF SCHEDULE D		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]		47/05
	FFICE OF THE	0.	1006-53

<sup>\*</sup>Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit. \$\ \text{E1} : \ \text{Z} \ \text{Wd} \ \text{S} \ \text{Wd} \ \text{Wd} \ \text{O1}

RECEIVED CITY OF TUCSON

**EXPENDITURES FOR OPERATING EXPENSES\*** 

Committee Name TAKE BACK TUCSON MAYOR thru\_3-15-10 Report Covering Period from: | - | - | - | 0 3. **AMOUNT** DATE **EXPENDITURES** 4. **EXPENDITURE** OF THE **EXPENDITURE** MADE NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE 11.99 NAME, ADDRESS, CITY, STATE AND ZIP a 13849 & Canyon Fairway Fail. 2-25-2010 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Cleaning Supplies, food, Software, Paper CHECK # 2320 NAME, ADDRESS, CITY, STATE AND ZIP 3-5-2010 Qurs + PO BOX 29040 Phornix Az 85038 CHECK# DESCRIPTION OF ITEMS OR SERVICES PURCHASED 2321 NAME, ADDRESS, CITY, STATE AND ZIP CHECK# DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE AND ZIP CHECK# DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE AND ZIP CHECK# DESCRIPTION OF ITEMS OR SERVICES PURCHASED NAME, ADDRESS, CITY, STATE AND ZIP CHECK# DESCRIPTION OF ITEMS OR SERVICES PURCHASED ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]

SCHEDULE D

<sup>\*</sup>Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

#### REPAYMENT OF ALL OTHER LOANS

**SCHEDULE D-5** 

Committee Name TAKE BACK TUCSON MAYO	2. ID#		
Report Covering Period from: 1-6-10 thru 3-15-1	0		
REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT	AMOUNT OF THE	
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	MADE	REPAYMENT	
NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
1756 Properties 3901 E. Broadway	3/10/10	\$3,333.33	
	7101	,	
TVLSON AZ 85711  NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
NAME ADDRESS CITY STATE 7ID AND ID#			
NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
	9		
NAME, ADDRESS, CITY, STATE,ZIP AND ID#			
		07	
	117	MIR Flor	
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	OLE	OF STATE	
	R	THE DES	
		<u>a</u>	
NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
		is .	
		40.00	
ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		\$ 3,333. 3	
		15	

#### ANY OTHER DISBURSEMENTS SCHEDULE D-7

1.	Committee Name TALEBACK TUCSON MAYUR	2. ID#		2740
3.	Report Covering Period from 1-4-10 thru 3-15	-10		
4,	ANY OTHER DISBURSEMENTS  NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT  WAS MADE; DESCRIPTION	DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT	
a.	NAME, ADDRESS, CITY, STATE, ZIP AND IDE Community food BANK 3003 S. Country Club Rd. TUCSON AZ 85713 DESCRIPTION	3/11/10	#219.52	
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION			
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#			
	DESCRIPTION		2-10-11	
d.	NAME, ADDRESS, CITY, STATE , ZIP AND ID#			
	DESCRIPTION		dimension	
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		OFFICE CITY	REC
	DESCRIPTION		5 PM OF T CLER	FIVE
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		2: 13	
	DESCRIPTION			
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page, Line 15, Column A]		×219.52	
	REV 3/00	Schedule	D-7 Page of	_

### IN-KIND CONTRIBUTIONS AND EXPENDITURES SCHEDULE E

1.	Committee Name Take Back Treson	Mayos		2. ID#	
3.	Report Covering Period from: 1-4-10	thru	3-1	5-10	
4.	IN-KIND CONTRIBUTIONS AND EXPEND	OITURES		*	FAIR
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN		DATE	MARKET VALUE	
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# HSC Properties 3901 & Broadway	CONTRIBUTION	X	1/16/10	\$610.66
	TUCSON AZ 85711	EXPENDITURE	M	1 (1610	
	DESCRIPTION FICE SPACE  OCCUPATION EMPLOYER				
	OCCUPATION EMPLOYER HSL Proper-	lics		0	
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# HSL Properties	CONTRIBUTION	<b>V</b>		
	JOI & BIOADWAY TUCSON AZ 85711	EXPENDITURE	X	1/16/10	\$200
	DESCRIPTION TABLES / Chairs				
	OCCUPATION EMPLOYER HSL PR	opetus			
C.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Allegra Prin + 1300 S Parle Ave	CONTRIBUTION	X	1:-1	\$24.45
	TUCSON AZ 85713	EXPENDITURE	X	1/28/10	\$cu.
	BUSINESS CARds				0 0
	OCCUPATION EMPLOYER Alleganne, Address, City, State, Zip and id#	A			
d.	NAME, ADDRESS, CITY, STATE, ŻIP AND ID#	CONTRIBUTION			OF TOES
		EXPENDITURE			TUCSO VED PN 2:
	DESCRIPTION				<u></u>
	OCCUPATION EMPLOYER				
5.	ENTER TOTAL OF IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE	E OF SCHEDUL	EE.		
	[If last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A]				2.02
6.	ENTER TOTAL OF IN-KIND EXPENDITURES ONLY IF LAST PAGE [If last page of Schedule E, transfer total to Detailed Summary Page, Line 11		ΞE		837.11